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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/574,146 05/18/2000 PAT 6,605,293 *MEY*  
 which claims benefit of 60/182,825 02/16/2000  
 and claims benefit of 60/135,009 05/20/1999

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Michael J. Wang</i> <i>MEY</i> Examiner's Signature Initials	STATE OR COUNTRY MA	SHEETS DRAWING 1	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
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TITLE  
 Polymer re-inforced anatomically accurate bioactive protheses

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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